24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)				-	1 OF 3 DF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICAT	
Save the Day PAC					1 1 1 1
				C C00625228	
Check if 24-hour report 48-hour report	X New report	Amends repor		M / D D	/ Y = Y = Y = Y
Full Name of Payee			Date of	f Public Distribution	n/Dissemination
Oh Must You? Productions, Inc.				11 06	2016
Mailing Address P.O. Box 988			Amoun	لتال	2010
City	State Zip Coo	lo.			3823.92
'	State Zip Code CA 90265			ection ID : SE.420	
Purpose of Expenditure				f Disbursement or	
Digital advertisement production - 'Blood Money'	Categ	ory/ ype 004		11 06	2016
Name of Federal Candidate		Support	Office Sought:	: House	District: 00
AYOTTE, KELLY A, , ,		Oppose	Presider	nt X Senate	State: NH
Calendar Year-To-Date Per Election for Office Sought	382	3.92	Disbursement 2016 Oth	For: Prima	ry X General
Full Name of Payee			Date of	f Public Distribution	on/Dissemination
Oh Must You? Productions, Inc.				11 / D D	/ Y Y Y Y Y
Mailing Address P.O. Box 988				11 06	2016
1.0. Box 666			Amoun	nt	
City	State Zip Co	de			3823.90
Malibu	CA 90265			ction ID : SE.4206	
Purpose of Expenditure	Categ	ory/		of Disbursement of	/ Y Y Y Y
Digital advertisement production - 'Blood Money'		ype 004		11 06	2016
Name of Federal Candidate		Support	Office Sought	: House	District: 00
PORTMAN, ROB, , ,		⋉ Oppose	Preside	nt X Senate	State: OH
Calendar Year-To-Date			Disbursement	For: Prima	ıry 🗶 General
Per Election for Office Sought	382	3.90	2016 Ot	her (specify) ▶ _	
(a) SUBTOTAL of Itemized Independent Expenditures			.		7647.82
(b) SUBTOTAL of Unitemized Independent Expenditure	98		•		
(c) TOTAL Independent Expenditures					1 40
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ago	or authorized commit				
Landson, Joel, , ,	[Electronically Fil	ed] Date	M = M /		016
Signature			<u> </u>		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

		FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	F	FEC IDENTIFICATION NUMBER ▼		
Save the Day PAC		C C00625228		
Check if 24-hour report 48-hour report New report A	mends report filed on	M / D = D / Y = Y = Y		
Full Name of Payee	Date of	Public Distribution/Dissemination		
Oh Must You? Productions, Inc.		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address P.O. Box 988	Amount			
City State Zip Code		3823.92		
Malibu CA 90265		Transaction ID : SE.4207 Date of Disbursement or Obligation		
Purpose of Expenditure Digital advertisement production - 'Blood Money' Category Typ		11 / 06 / Y Y Y Y Y Y		
Name of Federal Candidate	Support Office Sought:	House District:00		
RUBIO, MARCO, , ,	Oppose Presider	nt 🗶 Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 3823.9	Disbursement 2016 Oth	For: Primary X General mer (specify) ▶		
Full Name of Payee		Public Distribution/Dissemination		
Oh Must You? Productions, Inc.		11 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address P.O. Box 988	Amoun	لىننى لتا ك		
City State Zip Code		3823.92		
Malibu CA 90265		tion ID : SE.4208 Disbursement or Obligation		
Purpose of Expenditure Digital advertisement production - 'Blood Money' Category Typ		1 06 2016		
Name of Federal Candidate	Support Office Sought:	House District: 00		
BLUNT, ROY, , ,	Oppose Presider	nt Senate State: MO		
Calendar Year-To-Date Per Election for Office Sought 3823.9	Disbursement 2016 Ott	For: Primary X General ner (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	······································	7647.84		
(b) SUBTOTAL of Unitemized Independent Expenditures		7		
(c) TOTAL Independent Expenditures	······	7 7 7		
Under penalty of perjury I certify that the independent expenditures reported high with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.				
Landson, Joel, , , [Electronically Filed]	Date 11	07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature				

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OF

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Save the Day PAC	C C00625228
Check if X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee Oh Must You? Productions, Inc.	Date of Public Distribution/Dissemination
Mailing Address P.O. Box 988	11 06 7 2016
1 .G. Box 666	Amount
City State Zip Code	3823.92
Malibu CA 90265	Transaction ID : SE.4209 Date of Disbursement or Obligation
Purpose of Expenditure Digital advertisement production - 'Blood Money' Category/ Type 001	11 06 Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:00
BURR, RICHARD, , ,	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary ✓ General Other (specify) ✓
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3823.92
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	19119.58
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Landson, Joel, , , [Electronically Filed] Date Signature	1 07 2016
- 0	